### **SPECIFICATIONS**

### FOR MAGNETIC MEDIA FILING

#### **O**F

# SUSPICIOUS ACTIVITY REPORTS

(SAR)

(Form TDF 90-22.47)
REVISED MARCH 2000

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE

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These Specifications for Magnetic Media Filing of Suspicious Activity Reports (Form TDF 90-22.47) were developed under the sponsorship of the following:

### Department of the Treasury

Director, Financial Crimes Enforcement Network

**Internal Revenue Service** 

Director, Detroit Computing Center

#### **Purpose**

The purpose of this specification is to provide the requirements and conditions for filing Suspicious Activity Report (SAR), Treasury Form 90-22.47 on magnetic media.

The magnetic media forwarded to the Detroit Computing Center (DCC) will be considered as a substitute for the paper document, provided the transaction is accepted by the DCC system. Receipt and acknowledgment of magnetic media is further discussed in a later section.

These specifications apply to the program for the filings of SARs submitted on magnetic tape, cartridge, or diskette.

Approval to participate in the magnetic media reporting program is contingent upon the filer following these steps:

- Review specifications
- File application to participate
- Satisfy acceptance testing procedures
- Receive formal DCC approval
- File reports every two to four weeks (as required)
- Monitor quality

Continued participation in the Magnetic Media Program is contingent upon maintenance of quality standards and timely reporting.

# Application for Magnetic Media Reporting

For the purpose of this specification, the FILER is the organization responsible for filing the SAR. Filers are required to complete an Application for Magnetic Media Reporting (Form DCC-4419). A copy of this form can be found in the attachments. Requests for additional information or forms related to magnetic media processing should be addressed to the SAR Magnetic Media Coordinator at the DCC.

The application should be filed with DCC as soon as possible after receipt of these specifications. DCC will act on the application and notify the applicant of authorization to file. Magnetic media may not be filed with DCC until the applicant has received approval.

# Filing of Magnetic Media Reports

#### General:

DCC will advise magnetic filers when they may begin to file using magnetic media. This will be as early as possible after receipt of the application. Until this notification has been issued, magnetic media will not be accepted.

If files are unreadable due to format errors, etc., we will contact the transmitter by telephone to send a replacement for the file.

Any filer whose error rates remain at a high level or on a continuing basis may risk being discontinued as a magnetic media filer.

Filers are required to retain a copy of the SAR data and all original supporting documentation or business record equivalent for five years from the date of the suspicious activity report. All supporting documentation must be made available to appropriate authorities upon request.

#### Transmittal Process:

Magnetic media files and transmittals are submitted to DCC. Form(s) DCC-4804 and DCC-4802 (for multiple filers), must accompany magnetic submissions (see attachments). **DO NOT MAIL THE MEDIA AND THE TRANSMITTAL SEPARATELY**. DCC encourages the use of a substitute computer generated Form 4804 and/or Form 4802, which includes all information requested on the actual

form. Substitute forms should follow the format of the transmittal form.

All submitted cartridge and tape magnetic media files must include the following:

- A Form 4804 or computer generated substitute.
- The magnetic media with an external identifying label.
- A statement on the outside of the shipping container that says 'Attn: Tape Library Deliver unopened: SAR Magnetic Media; \_\_ of \_\_ '. If there is only one container, mark the outside as 1 of 1. For multiple containers, include the sequence (e.g., 1 of 3, 2 of 3, etc.).
- DCC will not pay for or accept 'Collect on Delivery' or 'Charged to IRS,' shipments of SARs on magnetic media that an individual or organization is legally required to report.

# Data Sequencing and Validation Criteria:

The following data controls must be adhered to or the SAR magnetic media will be rejected. The data records must be in the following sequence:

#### • <u>Transmitter (1A)</u>

There can only be one of this record type and it must be the first record on the file.

#### • Parent Institution (2A)

There can be more than one of this record type depending on the number of different financial institutions which are included on the file. This record type will immediately precede all records which relate to the financial institution.

• Financial Institution (Branch) (2B)

There can be more than one of this record type depending on the number of financial institution branches which are being reported. One of these records will immediately precede all SAR records for the branch.

#### • <u>SAR Activity (3A)</u>

There can be more than one of this record type on the file depending on the number of suspicious activities being reported for a financial institution branch.

#### • <u>Suspect Information (4A)</u>

There can be more than one of this record type dependent on the number of persons involved in this suspicious activity.

#### • <u>Description (6A)</u>

There can be more than one of this record type depending on the length of the explanation given for the suspicious activity.

#### • Branch Summary (9A)

There must be one of these records for each branch (2B record) of a financial institution being reported. It is to be the last record associated with the branch.

# • <u>Financial Institution Summary (9B)</u> There must be one of these records for each financial institution being reported. It is to be the last record associated with the financial institution and will follow the Branch Summary Record (9A) for the

• File Summary (9Z)

last branch reported.

There must be one of these records on the file and it must be the last record on the file.

#### Acceptance Procedures:

The Filer will be asked to provide a test file to

DCC which is consistent with these requirements:

- The test data will consist of a set of reports containing the data normally supplied by the filer. The test file should contain between 25 and 50 reports.
- Upon receipt of the filer's test file DCC will test, review and provide feedback to the filer within ten working days.
- If 95% of the filer's test returns are error-free and the file is correctly formatted, final acceptance will be issued by DCC allowing the filer to participate in the Magnetic Media Program.
- When a test file is found to be incorrectly formatted or more than 5% of the filer's test returns contain errors, DCC will identify to the filer the type of errors encountered. A new set of test data should be forwarded to DCC. The filer is responsible for correcting their software errors to eliminate the identified errors and any related errors.
- If, after three attempts, the filer's test file continues to be unacceptable, the filer must confer with the SAR Magnetic Media Coordinator and develop an acceptable plan for correcting deficiencies before any further tests are allowed.
- Filers granted acceptance will be notified.
- When the same service bureau system is used by several filers, only one test file of magnetic returns is required to cover the acceptance of all participating filers.
- DCC will issue a Transmitter Control Code (TCC) to be used with all submissions of SARs.

#### Filing Dates

Filing using magnetic media will be on a continuous basis. Magnetic media must be prepared and submitted to DCC for processing no later than 30 calendar days after the date of initial detection of facts that may consitute a basis for filing a SAR. If no suspect was identified on the date of detection of the incident requiring the filing, a FI may delay filing a SAR for an additional 30 calendar days to identify a suspect. In no case shall reporting be delayed more than 60 calendar days after the date of initial detection of a reportable transaction.

# Receipt and Acknowledgment of Magnetic Media Files

SARs will not be acknowledged to the transmitter. Tapes and cartridges will be returned with the original data removed.

#### Filing Corrected Reports

If a SAR, which was prepared and submitted on magnetic media, must be corrected, you must file a complete corrected SAR as soon as possible.

# All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION.

Corrected and Supplemental SARs will be accepted on magnetic media. Corrected and Supplemental magnetically filed SARs must include the appropriate code indicator.

# Magnetic Media Coordinator Contacts

Direct all requests for Magnetic Media related publications or information to the following address:

> SAR Magnetic Media Coordinator Internal Revenue Service 985 Michigan Ave. Detroit, MI 48226-2458 Phone Number (313) 234-1586

Fax Number (313) 234-1614

General Specifications Cartridge Specifications:

These specifications define the file characteristics acceptable for magnetic media reporting. These characteristics must be adhered to unless specifically authorized by the DCC in writing. All records should be fixed in length to the size specified for each record type. Usually DCC will be able to process a compatible cartridge file. The standard file characteristics are 18 or 36 track cartridges, EBCDIC, odd parity, 6250 BPI and standard labels. The standard data set name to be used on cartridges is **ITFMP.SARMAG.TDF9.** 

An external label must appear on each cartridge submitted for processing. The following information should appear on the label:

- The transmitters name
- Date of preparation
- A reel number assigned by the preparer which must match the reel number on the internal label (6 alpha numeric characters)
- Number of reels in file, including reel sequence number (i.e., 01 of 08)

Note: To allow better control processing of your files, uniquely numbered cartridge numbers must be transmitted when using multiple cartridges. For the purposes of these specifications the following conventions must be used for internal labels:

 Header Label
 Standard headers provided they begin with 1HDR, HDR1, VOL1, VOL2, UHL1, or 'b LABEL'.

Consist of a maximum of 80 positions.

 Trailer Label
 Standard trailer labels may be used provided that they begin with 1EOR, 1EOF, EOR1, EOF1, EOV1, or EOV2.

Consist of a maximum of 80 positions.

#### Diskette Specifications:

These specifications define the file characteristics acceptable for diskette media reporting. These characteristics must be adhered to unless specifically authorized by DCC in writing. All records should be fixed in length to the size specified for each record type.

Usually DCC will be able to process a compatible diskette file. The standard file characteristic is a 3.5 inch diskette double sided/double density or double sided/high density. The standard data set name to be used on files is **SARMAG**. All diskettes must be generated using MS-DOS on an IBM compatible personal computer in ASCII mode. All alphabetic characters must be in upper case only. An external label must appear on each diskette submitted for processing. The following information should appear on the label:

- The transmitters name
- Date of preparation
- Diskette sequence number (i.e., 01 of 03)
- Coverage beginning and ending dates
- Number of SAR Records

The diskette records defined in these specifications should be unblocked 420 character records. The industry standard record delimiter for diskette data records is the two byte combination of "0D0A" hexadecimal characters (carriage return, line feed).

Note: Diskettes will not be returned.

#### Overview of File

This file is an alternative to filing SARs on paper. If you file a transaction on MAGNETIC MEDIA DO NOT FILE a paper SAR for the same SAR.

All initial and amended report filings can be submitted on magnetic media.

SARs which have missing or incomplete information are considered original (initial) filings. When information becomes available they should be replaced on magnetic media, with the amended indicator code.

All dates are to be in the format of **century**, year, month, day with month and day both **being right justified and zero filled.** (CCYYMMDD)

Money amounts are 10 positions for detail and **should be right justified and zero filled.** Enter dollar amounts only. All cents should be rounded up to the next higher dollar amount (i.e., \$10,000.01 should be reported as \$10,001).

All name, address, and city fields are to be **left justified and space filled.** 

All alphabetic characters must be in upper case.

All name and address fields relating to SAR data must follow the Name Editing Conventions

specified in the attachments.

Account numbers must NOT contain leading zeroes unless they are part of the actual account number. All entries must be **left justified and space filled.** 

Do not include lower case characters.

All 'Filler' fields should be space filled. **Do not use low values** as a substitute for spaces. Blank fields must be space filled.

### Record Types (Input)

### Transmitter (1A) Record - Required

The first record on each file is to be the transmitter record which will contain information identifying the transmitter (person or organization handling the data accumulation and formatting). There will be only one Transmitter Record on each magnetic media file. Include the following data elements in this record:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '1A'.
3-37	Transmitter Name	35	Required. Enter the name of the individual or
			organization who is transmitting the transactions on
			this file.
38-67	Transmitter Address	30	Required. Enter the street address of the
			transmitter.
68-92	Transmitter City	25	Required. Enter the city of the transmitter.
93-94	Transmitter State	2	Required. Enter the transmitter state in
			abbreviated form. Use the country and state
			standard abbreviations in the attachments.
95-103	Transmitter Zip Code	9	Required. Enter the transmitter zip code.
104-106	Transmitter Area Code	3	Required. Enter the transmitter area code.
107-113	Transmitter Telephone	7	Required. Enter the transmitter telephone number.
114-148	Transmitter Contact	35	Required. Enter the name of an official contact for
			the transmitter.
149-157	Transmitter Employer	9	Required. Must be the valid 9 digit number
	Identification Number		assigned to the transmitter by IRS. Do not enter
	(EIN)		hyphens, slashes, ALPHA characters, all 9's, or all
450.465	D : : D		zeroes.
158-165	Coverage Beginning Date	8	Required. This will be the date of the earliest
			original transaction on the file. It is a numeric 8
			digit field in century, year, month, day format
166-173	Carragas Endina Data	8	(ccyymmdd).  Required. This will be the date of the latest
100-173	Coverage Ending Date	0	original transaction on the file. It is a numeric 8
			digit field in century, year, month, day format
			(ccyymmdd).
174-181	Transmitter Control Code	8	Required. This is the code assigned by the DCC.
			This code is also entered on Form 4804 (for tape
			and cartridge).
182-409	Filler	228	<u> </u>
410	New-Format Indicator	1	Required. Enter '4'.
411-420	User Field	10	

#### Parent Financial Institution (2A) Record - Required

This record identifies information regarding the Financial Institution Headquarters. The number of Financial Institution (Parent) records will depend on the number of different Financial Institutions which are included on the file. Include the following data elements in this record:

Field	Field	Length	Description and Remarks
Position	Name		_
1-2	Record Type	2	Enter '2A'.
3-37	Institution Name	35	Required. Enter the Institution's full legal name.
38-67	Institution Address	30	Required. Enter the address of the Institution.
			Do not abbreviate.
68-92	Institution City	25	Required. Enter the city where the Institution is
			located.
93-94	Institution State	2	Required. Enter the two (2) character state code
			from the standard state code abbreviations in the
			attachments.
95-103	Institution Zip Code	9	Required. Enter the zip code for the Institution.
104	Primary Federal Regulator	1	Required. Enter the Primary Federal Regulator as
			follows:
			A - Federal Reserve
			B - FDIC
			C - NCUA
			D - OCC
			E - OTS
105-113	Institution EIN	9	Required. Enter the EIN of the Parent Financial
			Institution.
114-410	Filler	297	
411-420	User Field	10	

#### Financial Institution Branch (2B) Record - Required

This record identifies information on the Financial Institution Branch where the activity occurred. The number of Financial Institution (Branch) Records is dependent on the number of branches the Financial Institution is reporting on the magnetic media file. Include the following data elements in these records:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Enter '2B'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting Branch. Right justify and zero fill.
10-39	Branch Office Address	30	Required. Enter the branch office address.
40-64	Branch Office City	25	Required. Enter the branch office city.
65-66	Branch Office State	2	Required. Enter the two (2) character state code from the standard state code abbreviations in the attachments.
67-75	Branch Office Zip Code	9	Required. Enter the zip code for the branch office (US only).
76-77	Branch Office Country Code	2	From the attachment, select the appropriate country code (if not the US).
78-85	Institution Closed Date	8	Required. Date Institution closed (if closed). It is to be a numeric eight (8) digit field in the format century, year, month, day (CCYYMMDD).
86-120	Contact Name	35	Name of the contact person.
121-160	Contact Title	40	Title of the contact person.
161-163	Contact Area Code	3	Area code of contact person.
164-170	Contact Phone Number	7	Phone number of contact person.
171-205	Contact Institution/Agency	35	Name of the Agency (if not filed by financial institution).
206-410	Filler	205	
411-420	User Field	10	

### Suspicious Activity (3A) Record - Required

This record identifies and describes the suspicious activity report. It occurs one time per suspicious activity. Include the following data elements in this record:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '3A'.
3-9	Branch Code	7	Required. Enter the Branch Number for the
			submitting Branch. Right justify and zero fill.
10-14	Transaction Sequence	5	Required. Enter a sequential number starting with
	Number		00001 and increment by 1 for each suspicious
			transaction (3A) record.
15-36	Account Number 1	22	Account number affected, if any.
37	Account Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.
38-59	Account Number 2	22	Additional account number affected.
60	Account2 Closed Indicator	1	Enter 'A' for Yes or a 'B' for No.
61-82	Account Number 3	22	Additional account number affected.
83	Account3 Closed	1	Enter 'A' for Yes or a 'B' for No.
	Indicator		
84-105	Account Number 4	22	Additional account number affected.
106	Account4 Closed	1	Enter 'A' for Yes or a 'B' for No.
	Indicator		
107-115	Law Enforcement	9	Enter the appropriate codes from the list below of
	Agencies Advised		the Law Enforcement Agencies which have already
			been advised (maximum of 9).
			A - DEA
			A = DEA B = FBI
			C = IRS
			D = Postal Inspection
			E = Secret Service
			F = US CUSTOMS
			G = Other Federal
			H = State
			I = Local

# Suspicious Activity (3A) Record - Continued

Field	Field	Length	Description and Remarks
Position	Name		
116-150	Law Enforcement Agency Name	35	Enter the name of the Law Enforcement Agency already contacted, (for G, H or I Enforcement Agency Codes.)
151-185	Law Enforcement Contact Person 1	35	Enter the name of person 1 contacted at Law Enforcement Agency.
186-188	Law Enforcement Agency Phone Number Area Code	3	Enter the area code of the enforcement agency contact person 1.
189-195	Law Enforcement Agency Phone Number	7	Enter the phone number of the enforcement agency contact person 1.
196-230	Law Enforcement Agency Contact Person 2	35	Enter the name of person 2 contacted at Law Enforcement Agency.
231-233	Law Enforcement Agency Phone Number Area Code	3	Enter the area code of the enforcement agency contact person 2.
234-240	Law Enforcement Agency Phone Number	7	Enter the phone number of the enforcement agency contact person 2.
241-248	From Violation Date	8	Enter the from date of the violation. CCYYMMDD format. If only one date enter here.
249-256	To Violation Date	8	Enter the to date of the violation. CCYYMMDD format. Only enter if a range of dates.
257-266	Violation Amount	10	Enter the dollar amount involved in known or suspected violation.
267-276	Violation Type	10	A maximum of 10 violation types as follows:  A = BSA B = Bribery/Gratuity C = Check Fraud D = Check Kiting E = Commerical Loan Fraud F = Computer Intrusion G = Consumer Loan Fraud
			H = Counterfeit Check I = Counterfeit Credit/Debit Card J = Counterfeit Instrument

## Suspicious Activity (3A) Record - Continued

Field	Field	Length	Description and Remarks
Position	Name		1
267-276	Violation Type - (cont.)		K = Credit Card Fraud  L = Debit Card Fraud  M = Defalcation/Embezzlement  N = False Statement  O = Misuse of Position or Self-Dealing  P = Mortgage Loan Fraud  Q = Mysterious Disappearance  R = Wire Transfer Fraud  S = Other
277-316	Violation Type Other	40	If other Violation Type indicated, describe the violation.
317-326	Amount of Loss	10	Dollar Amount of Loss prior to recovery (if applicable).
327-336	Amount of Recovery	10	Dollar Amount of Recovery (if applicable).
337	Material Impact Indicator	1	Has the suspected violation had a material impact on or otherwise affected the soundness of the institution: $A = Yes$ $B = No$
338	Bonding Company Notified	1	Has the institution bonding company been notified:  A = Yes B = No
339-346	Prepared Date	8	Date Report Prepared. CCYYMMDD format.
347-348	Number of Suspects	2	Required. Number of Suspect Records. Must be equal to the number of Suspect 4A Records.
349-350	Number of Explanation/Description Records	2	Required. Number of Explanation/Description Records. Must be equal to the number of Explanation/Description 6A Records.
351	Multiple Branch Code	1	If the suspicious activity took place at multiple branches, enter 'X'. Include the specific branch information in the narrative Part V.
352	Corrects Prior Report Indicator	1	Required. Enter 'X' if corrects prior report.

# Suspicious Activity (3A) Record - Continued

Field	Field	Length	Description and Remarks
Position	Name		
353	Suspect Information Unavailable	1	Enter 'X' if all the suspect information is unavailable. If this box is checked, there will be no 4A record.
354-410	Filler	57	
411-420	User Field	10	

#### Suspect Information (4A) Record - Required

This record contains information related to the Suspects identity. There can be more than one of these records if there are multiple suspects for the same suspicious activity. Include the following data elements in this record:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '4A'.
3-9	Branch Code	7	Required. Enter the branch number for the
			submitting branch.
10-14	Transaction Sequence	5	Required. Enter the transaction sequence number
	No.		from the associated 3A Record.
15-49	Suspect's Name	35	Enter the name of the Suspect in the format Last
			Name/First Name/Middle Initial. Left justified
			and space filled. Follow the Name Editing
			Conventions shown in the attachment.
50-79	Suspect's Address	30	Enter the street address of the suspect. Left
			justified and space filled.
80-104	Suspect's City	25	Enter the suspect's city. Left justified and space
			filled.
105-106	Suspect's State	2	From the attachment, select the appropriate state
			code for the suspect.
107-115	Suspect's Zip Code	9	Enter the zip code for the suspect.
116-117	Suspect's Country	2	From the attachment, select the appropriate
			country code.
	Suspect's TIN	9	Enter the SSN/TIN of the suspect.
127-134	Suspect's Date of Birth	8	Enter the suspect's date of birth. It is to be a
			numeric eight digit field in the format century,
			year, month, day (i.e. 19470930)
135-137	Suspect's Area Code	3	Enter suspect's residence area code.
138-144	Suspect's Phone Number	7	Enter suspect's residence telephone number.
145-147	Suspect's Work Area	3	Enter suspect's work area code.
	Code		
148-154	Suspect's Work Phone	7	Enter suspect's work telephone number.
	Number		
155-184	Suspect's Occupation	30	Enter the occupation, profession, or business of
			the suspect (i.e. attorney, securities broker, auto
			dealer, etc.).

# Suspect Information (4A) Record - Continued

Field	Field	Length	Description and Remarks
Position	Name		_
185	Suspect's Identification	1	Enter the appropriate code for identification provided as follows:  A - Driver's License/State ID B - Passport C - Alien Registration
			D - Other
186-225	Suspects ID Other Description	40	If 'D - Other' enter the description of Identification.
226-247	Suspect Identification Number	22	Enter the number used for identification.
248-249	Suspect Issuing Authority	2	Enter the appropriate code to designate the state/country where the identification was issued.
250-253	Suspect's Relationship	4	Enter the appropriate code(s) from the list below of the suspects relationship to the Financial Institution. Include only the first four (4) applicable items. Left justify and space fill if less than four (4) items.  B - Agent C - Appraiser D - Attorney E - Borrower F - Broker G - Customer H - Director I - Employee J - Officer K - Shareholder
254-293	Suspect's Relationship	40	L - Other  If 'L - Other' indicated above, enter the
Z34-Z73	Other	140	description of relationship to Financial Institution.

# Suspect Information (4A) Record - Continued

Field	Field	Length	Description and Remarks
Position	Name		
294	Suspect's Affiliation	1	Suspect's Relationship is an insider relationship.  Enter the appropriate code from the list below:  A - Yes  B - No
295	Suspect's Relationship	1	If Suspect Relationship is an insider, enter the appropriate code from the list below:  C - Still Employed at Financial Institution D - Suspended E - Terminated F - Resigned
296-303	Suspect Termination Date	8	If 'D, E, or F' indicated above, enter the date action taken. It is to be a numeric eight digit field in format century, year, month, day (i.e. 19970831).
304	Suspect Admission/Confession Indicator	1	Enter the appropriate code:  A- Yes B - No
305-410	Filler	106	
411-420	User Field	10	

### Information Explanation/Description (6A) Record - Required

This record contains a detailed Explanation/Description of known or suspected violation of law. This record may occur multiple times. Include the following data elements in this record:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '6A'.
3-9	Branch Code	7	Required. Enter the branch number for the submitting branch.
10-14	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated 3A Record.
15-410	Explanation/Description	396	Enter a detailed Explanation/Description of the Suspicious Activity. Upper case characters only. Do not use low values or special characters.
411-420	User Field	10	

#### Branch Summary (9A) Record - Required

There should be one of these records on the file for each financial institution branch which is being reported. This record contains counts of the number of each type record associated with the branch. Include the following data elements in these records:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '9A'.
3-9	Branch Code	7	Required. Enter the branch number for the
			submitting branch. Right justify and zero fill.
10-16	Suspicious Activity	7	Required. Enter a count of the number of
	Count		Suspicious Activity Records (3A) for the branch.
17-23	Suspect Record Count	7	Required. Enter the number of Suspect (4A)
			Records for the branch.
24-30	Explanation/Description	7	Required. Enter the number of
			Explanation/Description (6A) Records for the
			Branch.
31-410	Filler	380	
411-420	User Field	10	

#### Parent Financial Institution Summary (9B) Record - Required

There should be one of these records on the file for each financial institution which is being reported. This record is to follow the last reported Financial Institution (Branch) '9A' Summary Record for the financial institution. This record contains counts of the number of each type record associated with the financial institutions. Include the following data elements for these records:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '9B'.
3-9	Branch Record Count	7	Required. Enter count of Branch Records for the Financial Institution.
10-16	SAR Count	7	Required. Enter count of SARs for the Financial Institution.
17-23	Suspect Record Count	7	Required. Enter count of Suspect Records for the Financial Institution.
24-30	Explanation/Description Count	7	Required. Enter count of Explanation/Description Records for the Financial Institution.
31-410	Filler	380	
411-420	User Field	10	

#### File Summary (9Z) Record - Required

There should only be one of these records on the file and it must be the very last record on the file. This record contains counts of the number of the various record types which are on the file. These records should contain the following data elements:

Field	Field	Length	Description and Remarks
Position	Name		
1-2	Record Type	2	Required. Enter '9Z'.
3-9	Parent Institution Record	7	Required. Enter count of Parent Institution
	Count		Records.
10-16	Branch Transaction	7	Required. Enter count of Branch Institution
	Record Count		Records.
17-23	SAR Count	7	Required. Enter count of SARs.
24-30	Suspect Record Count	7	Required. Enter count of Suspect Records.
31-37	Explanation/Description	7	Required. Enter count of Explanation/Description
	Count		Records.
38-410	Filler	373	
411	User Field	10	

# Standard Country/State Abbreviations

Country/State	<u>Code</u>	Country/State	<u>Code</u>
Afar & Issas (French)	FT	Burundi	BY
Afghanistan	AF	Byelarus	ВО
Albania	AL	Cambodia	CB
Algeria	AG	Cameroon	CM
Andorra	AN	Canada	CA
Angola	AO	<u>States</u>	
Anguilla	AV	Alberta	AB
Antarctica	AY	British Columbia	BC
Antigua (Barbuda & Redonda)	AC	Manitoba	MB
Antilles, Netherlands	AE	New Brunswick	NB
Argentina	AR	New Foundland	NF
Armenia	AM	(Incl. Labrador)	
Aruba	AW	Nova Scotia	NS
Ashmore & Cartier Is.	AT	Ontario	ON
Australia	AS	Prince Edward Is.	PE
Austria	AU	Quebec	PQ
Azerbaijan	AJ	Saskatchewan	SN
Bahamas	BF	Yukon Terr.	YT
Bahrain	BA	North West Terr.	NT
Baker Island	FQ	Cape Verde Island	CV
Bangladesh	BG	Cayman Islands	CJ
Barbados	BB	Cezch Republic	CP
Bassas Da India	BS	Central African Republic	CT
Belgium	BE	Chad	CD
Belize	ВН	Channel Islands	OC
Benin (Dahomey)	DM	Chile	CI
Bermuda	BD	China (Mainland)	CH
Bhutan	BT	China (Taiwan)	TW
Bosnia & Hercegovina	BK	Christmas Islands	KT
Bolivia	BL	Clipperton Island	${ m IP}$
Botswana	BC	Cocos Islands	CK
Bouvet Is.	BV	Columbia	CO
Brazil	BR	Comoros Is.	CN
British Indian Ocean Terr.	IB	Congo (Brazzaville)	CF
British Virgin Islands	VI	Congo (Zaire)	CG
British West Indies	BW	Cook Is.	CW
Brunei	BX	Coral Sea Is. (Terr.)	CR
Bulgaria	BU	Costa Rica	CS
Burkina Faso, Upper Volta	HV	Croatia	HR
Burma	BM	Cuba	CU

Country/State	<u>Code</u>	Country/State	<u>Code</u>
Cyprus	CY	Great Britain	UK
Cyprus, North (Turkish)	CX	Greece	GR
Czechoslovakia	CZ	Greenland	GL
Denmark	DA	Grenada	GJ
Djibouti (Formerly Afars & Issas)	DJ	Guadeloupe	GP
Dominica	DO	Guatemala	GT
Dominican Republic	DR	Guenea	GV
Dronning Maud Land	NQ	Guernsey	GK
East Germany	GC	Guinea	GV
East Timor	TR	Guinea Bissau	GU
Ecuador	EC	Guyana	GY
Egypt	EG	Haiti	HA
El Salvador	ES	Heard & McDonald Islands	HM
England	UK	Holland	NL
Equatorial Guinea	EK	Honduras	НО
Eritrea	ER	Hong Kong	HK
Estonia	EN	Howland Island	HQ
Ethiopia	ET	Hungary	HU
Europa Island	EU	Iceland	IC
European Communities	EE	India	IN
Faroe Is.	FO	Indian Ocean Area French	X9
Falkland Is. (Islas Malvinas)	FA	Indian Ocean Terr. British	IΒ
Fiji	FJ	Indonesia	ID
Finland	FI	Iran (Persia)	IR
France	FR	Iraq	ΙZ
French Guiana	FG	Iraq-Saudi Arabia,	IY
French Polynesia	FP	Neutral Zone	
French Southern &	FS	Ireland	EI
Antarctic Lands		Isle of Man	IM
French West Indies	FW	Israel	IS
Gabon	GB	Italy	IT
Gambia, The	GA	Ivory Coast	IV
Gaza Strip	GZ	Jamaica	JM
Georgia	GG	Jan Mayen	JN
Germany & Berlin (East)	GC	Japan	JA
Germany	GE	Jarvis Island	DQ
Ghana	GH	Jersey	JE
Gibraltar	GI	Jordan	JО
Gilbert Island	GS	Juan De Nova Island	JU
Glorioso Islands	GO	Kampuchea	СВ

Country/State	<u>Code</u>	Country/State	<u>Code</u>
Kazakhstan	KZ	Colima	CL
Kenya	KE	Distrito	DF
Kingman Reef	KQ	Durango	DO
Kiribati Is.	KI	Guanajuato	GU
Korea, People's Republic	KN	Guerrero	GR
Korea, Republic of South	KS	Hidalgo	HL
Kuwait	KU	Jalisco	JL
Kyrgyzstan	KG	Mexico (State)	MX
Laos, Peoples Dem. Republic	LA	Michoacan de Ocampo	MC
Latvia	LG	Morelos	MR
Lebanon	LE	Nayarit	NA
Lesotho	LT	Nuevo Leon	NL
Liberia	LI	Oaxaca	OA
Libya	LY	Puebla	PB
Liechtenstein	LS	Queretaro de Arteaga	QU
Line Is.	CL	Quintana Roo	QR
Lithuania	LH	San Luis Potosi	SL
Luxembourg (AKA Luxemburg)	LU	Sinaloa	SI
Macao	MC	Sonora	SO
Macedonia	MK	Tabasco	TB
Madagascar	MA	Tamaulipas	TA
Malagasy	MS	Tlaxcala	TL
Malawi	MI	Veracruz-Llave	VC
Malaysia	MY	Yucatan	YU
Maldives	MV	Zacatecas	ZA
Mali	ML	Micronesia, Federated State	FM
Malta	MT	Moldova	MD
Martinique	MB	Monaco	MN
Mauritania	MR	Mongolia	MG
Mauritius	MP	Montenegro	MJ
Mayotte	MF	Montserrat	MH
Mexico	MX	Morocco	MO
<u>States</u>		Morocco (Spanish)	ME
Aguascalientas	AG	Mozambique	MZ
Baja, Calif. (Terr. North)	BA	Myanmar, Burma	MQ
Baja Calif. (Terr. South)	BJ	Namibia (SW Africa)	WA
Campeche	CE	Nauru	NR
Chiapas	CI	Navassa Island	BQ
Chihuahua	СН	Nepal	NP
Coahuila de Zaragoza	CU	Netherlands (Antilles)	NA

		1	
Country/State	<u>Code</u>	Country/State	Code
Netherlands (Holland)	NL	Sikkim	SK
Neutral Zone, S Iraq/Arabia	NT	Singapore	SN
New Caledonia	NC	Slovakia	SQ
New Hebrides	NH	Slovenia	SI
New Zealand	NZ	Solomon Island	BP
Nicaragua	NU	Somalia	SO
Niger	NG	South Africa	SF
Nigeria	NI	Soviet Union (USSR, Russia)	UR
Niue	NE	Spain	SP
Norfolk Island	NF	Spanish Sahara	SS
Norway	NO	Spratley Islands	PG
Oman (Muscat)	MU	Sri Lanka (Ceylon)	CE
Pakistan	PK	St. Kitts & Nevis	SC
Palau	PW	St. Helena	SH
Palestinian Autonomous Area	PS	St. Lucia	ST
Panama	PN	St. Pierre & Miquelon	SB
Papua-New Guinea	PP	St. Vincent & Grenadines	VC
Paracel Islands	PF	Sudan	SU
Paraguay	PA	Suriname	NS
Peru	PE	Svalbard	SV
Philippines	RP	Swaziland	WZ
Pitcairn Island	PC	Sweden	SW
Poland	PL	Switzerland	SZ
Portugal	PO	Syria	SY
Portuguese Timor	PT	Taiwan	TW
Qatar	QA	Tajikistan	TT
Reunion	RE	Tanzania	TZ
Rhodesia (Zimbabwe)	RH	Thailand	TH
Romania	RO	Togo	TO
Russia	RS	Tokelau Islands	TL
Rwanda	RW	Tonga	TN
San Marino	SM	Trinidad & Tobago	TD
Sanya (Yemen)	YE	Tunisia	TS
Sao Tome & Principe	TP	Turkey	TU
Saudi Arabia	SA	Turkmenistan	TX
Scotland	UK	Turks & Caicos Is.	TK
Senegal	SG	Tuvalu (Ellice Is.)	TV
Serbia	SJ	Uganda	UG
Seychelles	SE	Ukraine	UP
Sierre Leone	SL	Ukranian	UA

Country/State	Code
UK Indian Ocean Territory	IO
Union of Soviet Republics	UR
United Arab Emirates	TC
(UAE) (Trucial States)	
United Arab Republic (Egypt)	EG
United Kingdom (England,	UK
Great Britain, Scotland, Wales)	
United Nations	UN
United States	US
Upper Volta	UV
Uruguay	UY
Uzbekistan	UZ
Vanuatu	VU
Vatican City	VT
Venezuela	VE
Vietnam	NM
Vietnam (North)	VN
Virgin Islands (British)	VI
Wales	UK
Wallis & Futuna	WF
West Bank	WE
West Berlin	WB
West Germany	GE
West Indies French	XQ
Western Sahara	WI
Western Samoa	WS
Yemen (Aden) (South)	YS
Yemen Republic of (Sanaa)	YM
Yemen (San'A) (North)	YE
Yugoslavia	YO
Zaire	ZR
Zambia	ZA
Zimbabwe	ZI
Various (more than one)	XV

### Standard State Abbreviations

<u>State</u>	<u>Code</u>	<u>State</u>	<u>Code</u>
Alabama	AL	South Carolina	SC
Alaska	AK	South Dakota	SD
Arizona	AZ	Tennessee	TN
Arkansas	AR	Texas	TX
California	CA	Utah	UT
Colorado	CO	Vermont	VT
Connecticut	CT	Virginia	VA
Delaware	DE	Washington	WA
District of Columbia	DC	West Virginia	WV
Florida	FL	Wisconsin	WI
Georgia	GA	Wyoming	WY
Hawaii	HI		
Idaho	ID	<b>TERRITORIES</b>	
Illinois	IL		
Indiana	IN	<u>Name</u>	<u>Code</u>
Iowa	IA	American Samoa	AS
Kansas	KS	Federated States of Micronesia	FM
Kentucky	KY	Guam	GU
Louisiana	LA	Marshall Islands	MH
Maine	ME	Northern Mariana Islands	MP
Maryland	MD	Palau Island	PW
Massachusetts	MA	Puerto Rico	PR
Michigan	MI	Virgin Islands	VI
Minnesota	MN		
Mississippi	MS		
Missouri	MO	Note: The above Territories are c	onsidered
Montana	MT	States for SAR processing. Code	the Territory
Nebraska	NE	in the state field and 'US' in the co	ountry field.
Nevada	NV		
New Hampshire	NH		
New Jersey	NJ		
New Mexico	NM		
New York	NY		
North Carolina	NC		
North Dakota	ND		
Ohio	ОН		
Oklahoma	OK		
Oregon	Oregon OR		
Pennsylvania	PA		
Rhode Island	RI		

#### Zip Code Validation Table

The following table is used to validate all zipcode fields. The table consists of the first three digits of the valid zipcode range by state. Therefore, if a zipcode falls within the given range for the state indicated, it is considered valid. Otherwise, an error code will be issued. Consult the U.S. Postal Service Zipcode Directory to resolve any conflicts between state and zipcodes.

State <u>Abbrev.</u>	<u>State</u>	Valid <u>Range</u>	State Abbrev	. <u>State</u>	Valid <u>Range</u>
AL	Alabama	350 - 369	ОН	Ohio	430 - 458
AK	Alaska	995 - 999	OK	Oklahoma	730 - 749
AS	American Samoa	967 - 967	OR	Oregon	970 - 979
AZ	Arizona	850 - 865	PW	Palau Island	969 - 969
AR	Arkansas	716 - 729 <b>&amp; 755</b>	PA	Pennsylvania	150 - 196
CA	California	900 - 966	PR	Puerto Rico	006- 009
CO	Colorado	800 - 816	RI	Rhode Island	028 - 029
CT	Connecticut	060 - 069	SC	South Carolna	290 - 299
DE	Delaware	197 - 199	SD	South Dakoa	570 - 577
DC	District of Columbia	200 - 205	TN	Tennessee	370 - 385
FM	Federated States of	969 - 969	TX	Texas	750 - 799 <b>&amp; 885</b>
	Micronesia		UT	Utah	840 - 847
FL	Florida	320 - 349 <b>**</b>	VT	Vermont	050 - 059
GA	Georgia	300 - 319	VA	Virginia	220 - 246 <b>&amp; 201</b>
GU	Guam	969 - 969	VI	Virgin Islands	008 - 008
HI	Hawaii	967 - 968	WA	Washington	980 - 994
ID	Idaho	832 - 838	WI	Wisconsin	530 - 549
IL	Illinois	600 - 629	WV	West Virginia	247 - 268
IN	Indiana	460 - 479	WY	Wyoming	820 - 831
IA	Iowa	500 - 528		, 0	
KS	Kansas	660 - 679	** FL -	- 343, 345,and 348 are no	t valid.
KY	Kentucky	400 - 427		, ,	
LA	Louisiana	700 - 714	*** N	7 - Includes 004 Westches	ster and 063
ME	Maine	039 - 049		hers Island	
MH	Marshall Islands	969 - 969			
MD	Maryland	206 - 219		MILITARY 'STATE'	
MA	Massachusetts	010 - 027 <b>&amp; 055</b>			
MI	Michigan	480 - 499	AE	Armed Forces Africa	090 -098
MN	Minnesota	550 - 567	AA	Armed Forces Americas	340 -340
MS	Mississippi	386 - 397		(except Canada)	
MO	Missouri	630 - 658	AE	Armed Forces Canada	090 -098
MT	Montana	590 - 599	AE	Armed Forces Europe	090 -098
NE	Nebraska	680 - 693	AE	Armed Forces Middle	090 -098
NV	Nevada	<b>889</b> - 898		East	
NH	New Hampshire	030 - 038	AP	Armed Forces Pacific	962 -966
NJ	New Jersey	070 - 089			
NM	New Mexico	870 - 884			
NY	New York	090 - 149 <b>***</b>			
NC	North Carolina	269 - 289			
ND	North Dakota	580 - 588			
MP	Northern Mariana Is.	969 - 969			

### Standard Word Abbreviations

Word	<b>Abbreviation</b>	Word	<b>Abbreviation</b>
Accounting	ACCTG	Federal Credit Union	FCU
Accounts	ACCTS	Finance	FIN
Administration	ADMIN	Financial	FINCL
Air Force Base	AFB	First National Bank	FNB
Apartment	APT	Foreign	FORGN
American	AMER	General	GEN
Associates	ASSOC	Government	GOVT
Association	ASSN	Group	GRP
Avenue	AVE	Headquarters	HDQTRS
Bank	BK	Highway	HWY
Banking	BKG	Hospital	HOSP
Branch	BR	Incorporated	INC
Broadway	BWY	Industry(ies)	INDUST
Building	BLDG	Information	INFO
Casualty	CASLTY	Institute, Institution	INST
Center	CTR	Insurance	INS
Certificate	CERT	International	INT
Certificate of Deposit	CD	Lane	LN
Circle	CRL	Limited	LTD
Commerce	CMRC	Management	MGMT
Commission	COMM	Manufacturers	MFTRS
Company	CO	Manufacturing	MFG
Comptroller	COMPT	Market	MKT
Consolidated	CONS	Municipal	MUN
Construction	CONST	Mutual	MUTL
Corporation	CORP	National	NAT
Cooperative	COOP	Northeast	NE
County	CNTY	Northern, North	NO
Court	CT	Northwest	NW
Credit Union	CU	Organization	ORG
Department	DEPT	Park	PK
Deposit	DEP	Place	PL
Distributor, Distributing,	DISTB	Plaza	PLZ
District	DIST	Post Office	PO
Division	DIV	Railroad	RR
Drive	DR	Realty	RLTY
East, Eastern	E	Road	RD
Electrical	ELEC	Room	RM
Exchange	XCHG	Route	RT
Federal	FED	Savings	SAV

### Standard Word Abbreviations - (continued)

Word	<b>Abbreviation</b>
Savings and Loan	SL
Security	SEC
Service	SERV
Southeast	SE
Southern, South	SO
Southwest	SW
Street	ST
Suite	STE
Transportation	TRANS
Trust	TR
University	UNIV
US Air Force	USAF
US Army	USA
US Coast Guard	USCG
US Marine Corps	USMC
US Navy	USN
Village	VLGE
Western, West	W

Note: All abbreviations listed may be changed from singular to plural, and vice versa, by the addition or deletion of the letter 's'.

#### Name Editing Instructions

- A. Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes which distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial (e.g. Doe\ John\L Jr).
- B. Delete all punctuation (e.g., 'JR.' would be submitted as 'JR').
- C. Do not use the following words in fields:
  - a. THE
  - b. SEE ABOVE
  - c. SAME AS ABOVE
  - d. SAME
  - e. COMPUTER GENERATED
  - f. SIGNATURE CARD
  - g. NONE
  - h. NON CUSTOMER
  - i. CUSTOMER
  - i. T/A
  - k. VARIOUS
  - l. OTHER
  - m. N/A
  - n. UNKNOWN
- D. Spanish surnames. Care must be taken in formatting Spanish surnames as the names are usually written in the order of first name, father's last name, and then mother's last name, i.e., Juan Vega Santiago. The father's last name, Vega would be used as the last name; however, both last names should be retained. Example: Vega/Santiago/Juan.
- E. Place a slash ('/') before each name (including suffixes) except the first surname (e.g., White/Elizabeth/A) but not between compound names such as 'Van Gogh'.

- F. If only the surname of an individual is present, then place a slash after it (e.g., <u>Jones/</u>).
- G. If a non-individual is listed, do not enter slashes between names. Delete the word, 'The' whenever it appears. Drop the subdivision name (e.g., 'The First National Bank of Chicago-Manchester Branch' will be 'FNB of Chicago-Manchester').

#### Definition of Terms

 $\boldsymbol{b}$ Denotes a blank position. Enter

blank(s) when this symbol is

used.

A report, which is used to Corrected

correct a report that was

previously filed.

Currency For SAR purposes, currency is the

> coin and paper money of the United States or any country, which is circulated and customarily

used and accepted as money.

DBADoing Business As

DCCThe Detroit Computing Center

EINEmployer Identification Number

*File* For purposes of this procedure, a

> file consists of all magnetic tape, cartridge or diskette records submitted by a transmitter.

Resolution

Code which signifies who is to Code receive the correspondence

relating to transactions.

SAR Suspicious Activity Report

(Form TDF 90.22-47)

SSN Social Security Number Suspect For SAR purposes, a suspect

is a person with questionable/

suspicious activities.

Transactor A person(s) who conducts a

transaction.

**Transmitter** Person(s) or organization(s) who

prepare the magnetic tape files.